

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Tallahassee, Florida
Secretary of State
Tallahassee, Florida 32399-0001

FILED
SECRETARY OF STATE
CORPORATIONS

95 MAY -1 AM 11:49

DOCUMENT # 749483

(4)

PIEDMONT F ASSOCIATION, INC.

DO NOT WRITE IN THIS SPACE

1. Principal Place of Business C/O PRIME MANAGEMENT GROUP, INC. 1051 SOUTH ROGERS CIRCLE BOCA RATON FL 33487		2a. Mailing Address C/O PRIME MANAGEMENT GROUP, INC. 1051 SOUTH ROGERS CIRCLE BOCA RATON FL 33487		3. Date Incorporated or Qualified 10/23/1979	3a. Date of Last Report 03/24/1994
2. Principal Place of Business 21 Suite Apt # etc.		2a. Mailing Address 26 Suite Apt # etc.		4. FEI Number 59-2029121	Applied For Not Applicable
22 City & State		27 City & State		5. Certificate of Status Desired ☐ \$0.75 Additional Fee Required	
23 Zip		28 Zip		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
24 Country		29 Country		7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ \$68.75 Supplemental Fee Not Required	
25		30		8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No	

9. Name and Address of Current Registered Agent

RAIBLE, RONALD
1051 SOUTH ROGERS CIRCLE
BOCA RATON FL 33487

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL
85 Zip Code	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	11 TITLE	☒ Change ☐ Addition
NAME	SCHWARTZ, IRVING	12 NAME	Pollock, Joseph
STREET ADDRESS	KINGS PT. PIEDMONT F 274	13 STREET ADDRESS	386 Piedmont F
CITY, ST, ZIP	DELRAY BEACH FL	14 CITY, ST, ZIP	Delray Bch, FL 33484
TITLE	V	21 TITLE	☐ Change ☐ Addition
NAME	JONES, BERNARD	22 NAME	Lewchstein, Max
STREET ADDRESS	KINGS PT. PIEDMONT F 278	23 STREET ADDRESS	256 Piedmont F
CITY, ST, ZIP	DELRAY BEACH FL	24 CITY, ST, ZIP	Delray Bch, FL 33484
TITLE	S	31 TITLE	☒ Change ☐ Addition
NAME	DALINKA, HILDA	32 NAME	Slack, Dennis
STREET ADDRESS	KINGS PT. PIEDMONT F 280	33 STREET ADDRESS	242 Piedmont F
CITY, ST, ZIP	DELRAY BEACH FL	34 CITY, ST, ZIP	Delray Bch, FL 33484
TITLE	TD	41 TITLE	☒ Change ☐ Addition
NAME	FELLER, DORIS	42 NAME	Margolis, Al
STREET ADDRESS	KINGS PT. PIEDMONT F 245	43 STREET ADDRESS	251 Piedmont F
CITY, ST, ZIP	DELRAY BEACH FL	44 CITY, ST, ZIP	Delray Bch, FL 33484
TITLE	D	51 TITLE	☒ Change ☐ Addition
NAME	STERN, MARILYN	52 NAME	Margolis, Bernice
STREET ADDRESS	KINGS PT. PIEDMONT F 279	53 STREET ADDRESS	251 Piedmont F
CITY, ST, ZIP	DELRAY BEACH FL	54 CITY, ST, ZIP	Delray Bch, FL 33484
TITLE	D	61 TITLE	☒ Change ☐ Addition
NAME	BERZIN, SHIRLEY	62 NAME	Grabel, Pauline
STREET ADDRESS	PIEDMONT F 275	63 STREET ADDRESS	241 Piedmont F
CITY, ST, ZIP	DELRAY BEACH FL	64 CITY, ST, ZIP	Delray Bch, FL 33484

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report for supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 12 or Block 13 as required, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-8-95

499-8096

Date

Telephone Number